

# Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program

Notice of Funding Opportunity
Technical Assistance Webinar

# Agenda

- I. Background and Purpose
- II. Public Health Data/Resources: CDC
- III. Eligibility
- IV. Grant Authorized Suicide Prevention Services and Program Scope
- V. Review of Application Requirements
- VI. Fiscal/Budgeting
- VII. Application Submission
- VIII. Application Review Criteria

# Background and Purpose

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Executive Director, VA Suicide Prevention

Acting Executive Director, PREVENTS

Office of Mental Health and Suicide Prevention

Department of Veterans Affairs

# **Building Upon VA's Public Health Approach to Suicide Prevention**

- VA's top clinical priority is preventing suicide among all Veterans—including those who do not, and may never, seek care within the VA health care system.
- VA's public health approach to suicide prevention, guided by <u>VA's National Strategy for Preventing Veteran Suicide (2018)</u>, and in alignment with the White House's strategy on <u>Reducing Military and Veteran Suicide</u> (2021), blends community-based prevention and clinically based interventions.
- The Staff Sergeant Parker Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP) builds upon these initiatives in order to enhance connections to direct services for Veterans and their families.

# **Hannon Act Background**

### **Commander John Scott Hannon**

Following a decorated 23-year career with the Navy SEALs, Commander John Scott Hannon retired to his family home in Helena, Montana, where he received VA treatment for posttraumatic stress disorder (PTSD), traumatic brain injury (TBI), depression, and bipolar disorder. Commander Hannon found solace and recovery in many local organizations that allowed him to give back to his fellow Veterans and his community, including the National Alliance for Mental Illness (NAMI), animal rescue and rehabilitation, working with at-risk youth, and helping Veterans access the outdoors. Commander Hannon died by suicide on Feb. 25, 2018, at the age of 46.

The Commander John Scott Hannon Veterans Mental Health Care Improvement Act of 2019 (Hannon Act) was signed into law on Oct. 17, 2020. The law enhances VA programs for mental health care, suicide prevention, care for women Veterans, and telehealth care for Veterans and transitioning service members.

### Overview of the Seven Titles of the Hannon Act

### **Title VII - Other Matters**

(Sections 701-705)

- Expanded VA telehealth
- Partnerships with non-federal government entities to provide hyperbaric oxygen therapy to Veterans and studies on the use of such therapy
- Technical qualifications for licensed hearing aid specialists and requirement for specialist appointment
- Use Commercial Institutional Review Boards in sponsored research trials
- Creation of Office of Research Reviews within VA Office of Information & Technology

### Title VI - Improvement of Care and Services for Women Veterans

(Sections 601-602)

- Expansion of capabilities of Women Veterans Call Center to include text messaging
- Requirement for VA website to provide information on services available to women Veterans

### Title V - Improvement of Mental Health Medical Workforce

(Sections 501-507)

- Staffing improvement plan for VA mental health providers
- Establishment of VA Readjustment Counseling Service Scholarship Program
- Comptroller general report on VA Readjustment Counseling Service
- Expansion of reporting requirements on VA Readjustment Counseling Service
- Briefing on alternative work schedules for VHA employees
- · Staffing VHA suicide prevention coordinators
- Report on VA efforts to implement safety planning in emergency departments

# Title I - Improvement to Transition of Individuals to Services from Department of Veterans Affairs

(Sections 101–104)

- Strategic plan on expansion of health care coverage for Veterans transitioning from service in the armed forces
- Review records of former members of the armed forces who die by suicide within one year of separation from the armed forces
- Report on VA REACH VET program
- Report on care for former members of the armed forces with other than honorable discharge



### Title IV - Oversight of Mental Health Care and Related Services

(Sections 401-405)

- Study on effectiveness of VA suicide prevention and mental health outreach programs
- · Oversight of mental health and suicide prevention media outreach conducted by VA
- Comptroller general management review of mental health and suicide prevention services of VA
- Comptroller general report on efforts of VA to integrate mental health care into primary care clinics
- Report on joint mental health programs by VA and DoD

### Title II - Suicide Prevention

(Sections 201-205)

- Financial assistance to certain entities to provide or coordinate the provision of suicide prevention services for eligible individuals and their families
- Analysis on feasibility and advisability of VA providing certain complementary and integrative health services
- Pilot program to provide Veterans access to complementary and integrative health programs
- VA study of all-cause mortality of Veterans, including by suicide, and review of staffing levels of mental health professionals
- Report on VA's management of Veterans at high risk for suicide

### Title III - Programs, Studies, and Guidelines on Mental Health

(Sections 301-306)

- Study on connection between living at high altitude and suicide risk factors among Veterans
- Establishment by VA and Department of Defense (DoD) of a clinical provider treatment toolkit and accompanying training materials for comorbidities
- Update of clinical practice guidelines for assessment and management of patients at risk for suicide
- Establishment by VA and DoD of clinical practice guidelines for the treatment of serious mental illness
- Precision medicine initiative of VA to identify and validate brain and mental health biomarkers
- Statistical analyses and data evaluation by VA

# **Key Elements of Hannon Act**

### Improve access options to mental health and suicide prevention services

- Expanding community-based prevention strategies through the grant-making authority
- Improving rural Veterans' access to care by expanding telehealth technology
- Developing a strategic plan on how VA can provide health care to Veterans during the one-year period following the discharge or release from military service

### Support the expanded scope and breadth of services available to Veterans

- Expanding Veterans' access to alternative therapies, such as a pilot program to provide Veterans access to complementary and integrative health programs
- Programs include animal therapy, agritherapy, sports and recreation therapy, art therapy and posttraumatic growth programs and partnerships with non-federal government entities to provide hyperbaric oxygen therapy to Veterans and studies on the use of such therapy for treatment of posttraumatic stress disorder and traumatic brain injury

### Improve equity for sub-populations of Veterans

- Expanding capabilities of the Women Veterans Call Center to include text messaging
- Enhancing current suicide prevention efforts by establishing a grant program that expands collaborations with community organizations
- Enabling VA to award grants to entities for the expansion of telehealth technology for secure and private telehealth services



Spotlight:
Staff Sergeant Parker
Gordon Fox Suicide
Prevention Grant Program

A \$174 million, three-year community-based grant program that will provide resources to community organizations serving certain Veterans at risk of suicide and their families across the country.

# About Staff Sergeant Parker Gordon Fox

SSG Fox SPGP honors Veteran Parker Gordon Fox, who joined the Army in 2014 and was a sniper instructor at the U.S. Army Infantry School at Fort Benning, Georgia. Known for a life of generosity and kindness to others in need, Staff Sergeant Fox died by suicide on July 21, 2020, at the age of 25.



# Suicide-Related Data: Brief Overview

Deb Stone, Sc.D., MSW, MPH

Lead Behavioral Scientist/Team Lead

Suicide Prevention Team

Centers for Disease Control and Prevention

National Center for Injury Prevention and Control

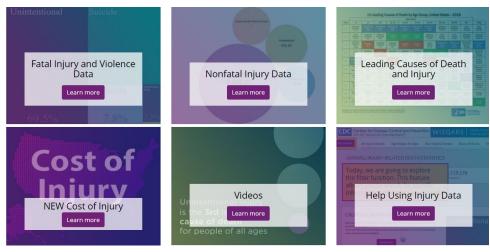
CDC

# **Mortality Data**

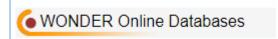
- National Vital Statistics System
- National Violent Death Reporting System



 $WISQARS^{\text{\tiny{TM}}}$  — Web-based Injury Statistics Query and Reporting System



https://www.cdc.gov/injury/wisqars/index.html



https://wonder.cdc.gov/

# National Vital Statistics System (NVSS)

### Accessible in CDC WISQARS & WONDER

- NVSS suicide data come from death certificate
- WISQARS--data by year, sex, age, race/ethnicity, means of suicide, urban vs. rural, and state: <a href="https://wisqars.cdc.gov/fatal-reports">https://wisqars.cdc.gov/fatal-reports</a>
- Leading causes of death for states by age, sex, race/ethnicity also available: <a href="https://wisqars.cdc.gov/fatal-leading">https://wisqars.cdc.gov/fatal-leading</a>
- WONDER--all above fields plus more detailed data (e.g., by county, month, ICD 10 codes): <a href="https://wonder.cdc.gov/">https://wonder.cdc.gov/\*</a>
- Data typically released in December or January for prior year (2020 data released in Dec. 2021)
- Provisional data also now available\*\*
- No indicator of Veteran status

<sup>\*</sup>Select underlying cause of death from menu, then first option, 1999-2020

<sup>\*\*</sup>Select multiple cause of death (Provisional), then first option—2018 – Last Month

# National Violent Death Reporting System (NVDRS)

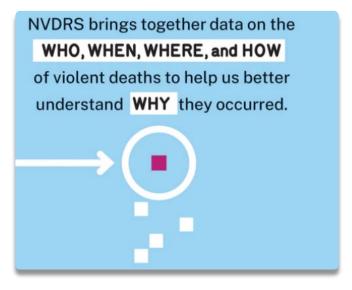


https://www.cdc.gov/injury/wisqars/nvdrs.html

- State-based, anonymous data system including suicides in 50 states, D.C., and Puerto Rico\*
- Pools data from death certificate, medical examiner/coroner report, law enforcement reports
- Useful for informing prevention
- Publicly available data in Wisqars;
  - Includes year, state, race/ethnicity, sex, place of death, homeless status, military status, and known circumstances
- Restricted access data available by application to <a href="mailto:nvdrs-rad@cdc.gov">nvdrs-rad@cdc.gov</a>, includes toxicology information and more than 600 data elements

# National Violent Death Reporting System (NVDRS) (cont'd)

- Variable: Ever served in U.S. military (current or former service grouped together)
- Occupational data elements further help identify current vs. former military status of decedents
- NVDRS program coordinators in each state: <a href="https://www.cdc.gov/violenceprevention/datasources/nvdr">https://www.cdc.gov/violenceprevention/datasources/nvdr</a> s/stateprofiles.html





# **Morbidity Data**

### **CDC-Run Systems**

National Electronic Injury Surveillance System-All Injury Program (NEISS-AIP)

https://wisqars.cdc.gov/nonfatal-reports

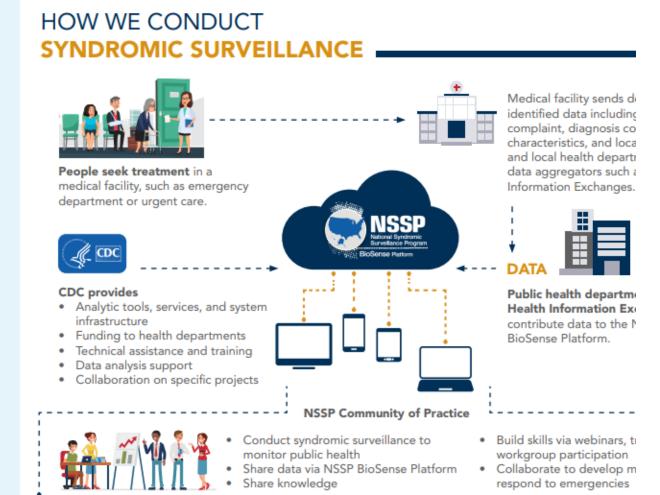
Syndromic Surveillance

https://www.cdc.gov/nssp/overview.html

- NEISS-AIP collects data on nonfatal self-harm cases from a sample of Emergency Departments
- Syndromic Surveillance: Collaboration between state and local health departments, CDC, and partners to track and monitor health events in near real-time
- Data are collected from more than 6,000 health care facilities covering 49 states and D.C.
- Data are available for analysis within 24 hours of patient visit
- Syndromic surveillance can serve as an early warning system for public health concerns

### **Syndromic Surveillance**

Contact your state health department for more information about data access



### **Risk Factor Data**

- Behavioral Risk Factor Surveillance System (BRFSS)
  - The Behavioral Risk Factor Surveillance System (BRFSS) is the nation's premier system of healthrelated telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services.
  - https://www.cdc.gov/brfss/index.html
- The National Survey on Drug Use and Health (NSDUH)
  - Provides up-to-date information on tobacco, alcohol, and drug use, mental health, and other healthrelated issues in the U.S.
  - NSDUH began in 1971 and is conducted every year in all 50 states and the District of Columbia. This year, almost 70,000 people will be interviewed for this important study.
  - Query data online: <a href="https://pdas.samhsa.gov/#/survey/NSDUH-2020-DS0001">https://pdas.samhsa.gov/#/survey/NSDUH-2020-DS0001</a>
- Both include Veteran status variables

# Thank you!

### Deborah M. Stone, ScD, MSW, MPH

Lead Behavioral Scientist

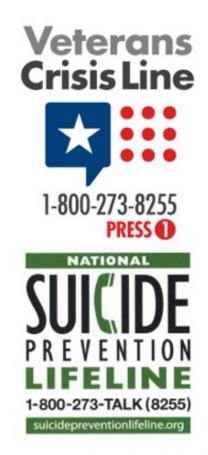
Suicide Prevention Team

Division of Injury Prevention

National Center for Injury Prevention and Control

Centers for Disease Control and Prevention

Email: <u>zaf9@cdc.gov</u>



The finding and conclusions of this presentation are those of the author and do not necessarily reflect the official position of the Centers for Disease Control and Prevention.

### **CDC Resource List**

- Preventing Suicide: A Technical Package of Policy, Programs, and Practices: https://www.cdc.gov/suicide/prevention/index.html
- Risk and protective factors: <a href="https://www.cdc.gov/suicide/factors/index.html">https://www.cdc.gov/suicide/factors/index.html</a>
- Data sources: https://www.cdc.gov/suicide/resources/data-sources.html
- Disparities in suicide: <a href="https://www.cdc.gov/suicide/facts/disparities-in-suicide.html">https://www.cdc.gov/suicide/facts/disparities-in-suicide.html</a>
- CDC suicide prevention funded programs: <a href="https://www.cdc.gov/suicide/programs/index.html">https://www.cdc.gov/suicide/programs/index.html</a>
- Transforming Communities: <a href="https://theactionalliance.org/sites/default/files/transformingcommunitiespaper.pdf">https://theactionalliance.org/sites/default/files/transformingcommunitiespaper.pdf</a>
- Healthy People 2030: <a href="https://health.gov/healthypeople">https://health.gov/healthypeople</a>
- 2012 National Strategy for Suicide Prevention: <a href="https://www.hhs.gov/surgeongeneral/reports-and-publications/suicide-prevention/index.html">https://www.hhs.gov/surgeongeneral/reports-and-publications/suicide-prevention/index.html</a>
- National Action Alliance for Suicide Prevention community-based prevention priority: <a href="https://theactionalliance.org/sites/default/files/agenda.pdf">https://theactionalliance.org/sites/default/files/agenda.pdf</a>
- Health and Human Services Strategic Plan FY 2018-2022: <a href="https://www.hhs.gov/about/strategic-plan/index.html">https://www.hhs.gov/about/strategic-plan/index.html</a>
- National Violent Death Reporting System grant program (CDC-RFA-CE09-904): <a href="https://www.federalgrants.com/Development-of-the-National-Violent-Death-Reporting-System-NVDRS-CDC-RFA-CE09-904-42161.html">https://www.federalgrants.com/Development-of-the-National-Violent-Death-Reporting-System-NVDRS-CDC-RFA-CE09-904-42161.html</a>

# **CDC** Resource List (cont'd)

- Emergency Department Surveillance of Nonfatal Suicide-Related Outcomes (CE19-1906): <a href="https://www.federalgrants.com/Emergency-Department-Surveillance-of-Nonfatal-Suicide-Related-Outcomes-ED-SNSRO-76556.html">https://www.federalgrants.com/Emergency-Department-Surveillance-of-Nonfatal-Suicide-Related-Outcomes-ED-SNSRO-76556.html</a>
- National Violent Death Reporting System funded states: https://www.cdc.gov/violenceprevention/datasources/nvdrs/index.html
- Emergency Department Surveillance of Nonfatal Suicide-Related Outcomes funded states: <a href="https://www.cdc.gov/nssp/news.html">https://www.cdc.gov/nssp/news.html</a>
- Overdoses Data to Action recipients: <a href="https://www.cdc.gov/drugoverdose/od2a/index.html">https://www.cdc.gov/drugoverdose/od2a/index.html</a>
- Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide: <a href="https://www.cdc.gov/evaluation/guide">https://www.cdc.gov/evaluation/guide</a>
- CDC EvaluAction: <a href="http://vetoviolence.cdc.gov/apps/evaluaction">http://vetoviolence.cdc.gov/apps/evaluaction</a>
- CDC Framework for Program Evaluation in Public Health: <a href="www.cdc.gov/eval">www.cdc.gov/eval</a>
- CDC Program Performance and Evaluation Office List of Program Evaluation Resources: <a href="http://www.cdc.gov/eval/resources/">http://www.cdc.gov/eval/resources/</a>
- Practical Strategies for Culturally Competent Evaluation: Evaluation
   Guide: https://www.cdc.gov/asthma/program\_eval/cultural\_competence\_guide.pdf

# Eligibility

# **Eligible Entities**

SSG Fox SPGP will provide resources to eligible entities serving eligible individuals across the country.

### **Organizations**

- Eligible entities generally include:
  - Incorporated, non-profit private institutions or foundations with a governing board
  - A corporation wholly owned or controlled by a non-profit organization with a governing board
  - Indian tribes
  - Community-based organizations that can effectively network with local civic organizations, regional health systems, and other settings where eligible individuals and their families are likely to have contact
  - State or local governments
- Eligible entities can apply for grants worth up to \$750,000 per year and may apply to renew awards from year to year throughout the length of the program.

### Eligible Individuals

SSG Fox SPGP will provide resources to eligible entities serving eligible individuals across the country.

### Eligible Individuals

- Eligible individuals to receive services as part of the SSG Fox SPGP include persons at risk for suicide who are:
  - Veterans under title 38
  - Former service members who were discharged from the armed forces under conditions that were not honorable but also not dishonorable or by court martial
  - Certain Veterans and members of the armed forces eligible for Readjustment Counseling Services from VA

Note: Family members of eligible individuals will also be able to receive certain services.

# Participant Eligibility for SSG Fox SPGP

Risk of suicide is defined as exposure to, or the existence of, any of the following factors, to any degree, that increase the risk of suicidal ideation and/or behaviors:

### 1. Health Risk Factors

Mental health challenges, substance use, serious or chronic health conditions or pain, and traumatic brain injury

### 2. Environmental Risk Factors

Prolonged stress, stressful life events, unemployment, homelessness, recent loss, and legal or financial challenges

### 3. Historical Risk Factors

Previous suicide attempts, family history of suicide, and history of abuse, neglect, or trauma

# Grant Authorized Suicide Prevention Services

### **Grant Authorized Suicide Prevention Services**

- Outreach to eligible individuals, with an emphasis on those who are at highest risk for suicide or who are not receiving health care or other services furnished by VA
- Baseline mental health screening for risk (Required for all grantees)
- Education on suicide risk and prevention to families and communities
- Clinical services for emergency treatment
- Case management services
- Peer support services
- Assistance in obtaining VA benefits for which the person and their family may be eligible
- Assistance in obtaining and coordinating of other benefits provided by the federal government, a state or local government, or an eligible entity

# **Grant Authorized Suicide Prevention Services (cont'd)**

- Assistance with obtaining services relating to emergent needs, such as health care services, daily living services, personal financial planning, and counseling (transportation services, temporary income support services, fiduciary and representative payee services, childcare, and certain legal services)
- Nontraditional and innovative approaches and treatment practices as determined appropriate by VA, in consultation with appropriate entities
- Other suicide prevention financial assistance (e.g., payments to a third party not to exceed \$750 per participant in any one-year period for expenses related to gaining or keeping employment or lethal means safety and secure storage, etc.)
- Other suicide prevention services as set forth in the NOFO or approved by VA (demonstrate evidence-informed interventions for improving mental health status and well-being and reducing the suicide risk of eligible individuals and their families)

# **VA Priority Areas**

VA may prioritize the distribution of suicide prevention services grants to:

- Rural communities
- Tribal lands
- Territories of the United States
- Medically underserved areas
- Areas with a high number or percentage of minority Veterans or women Veterans
- Areas with a high number or percentage of calls to the Veterans Crisis Line

# Review of Application Requirements

# **Application Section A – Maximum 30 Points**

# Background, Qualifications, Experience, and Past Performance of Applicant and Any Identified Community Partners

- General overview of the applicant's mission and organizational history
- Applicant's organizational experience in administering programs similar in size and scope
- Staff qualifications
- Organizational qualifications and past performance, including experience with Veterans services

### **Application Section B – Maximum 30 Points**

### **Program Concept and Suicide Prevention Services Plan**

- Need for program
- Outreach and screening plan
- Program concept
- Program implementation timeline
- Coordination with VA
- Ability to meet VA's requirements, goals, and objectives for SSG Fox SPGP
- Capacity to undertake program

# Application Section B (cont'd) – Maximum 30 Points

### Non-Traditional Services and Innovative Services and Other Suicide Prevention Services

- Provide a clear description of the services
- Summarize and cite the literature supporting the evidence for effectiveness
- State the goal of the intended services with an indication of how those goals can be measured
- Describe the plan to measure the proposed outcomes and evaluate the effectiveness of the services provided
- Include in the proposed evaluation methodology whether the grantee is already providing the services. If the grantee is already providing services, any existing data should be included in the application to demonstrate the effectiveness. Existing data can include outcomes, participant exit interviews, participant self-report, and participant satisfaction surveys.

# **Application Section C – Maximum 15 Points**

### **Quality Assurance & Evaluation Plan**

- Demonstrate clear, realistic, and measurable goals of SSG Fox SPGP's aim of reducing and preventing suicide among Veterans
- Demonstrate a clear plan to regularly monitor the quality of the suicide prevention services provided to participants
- Describe the process by which the applicant will remediate non-compliant aspects of the program, if and when they are identified
- Demonstrate that program management team has the capability and system established to provide timely and accurate reports to VA at the set frequency

### **Application Section D – Maximum 15 Points**

### **Financial Capability Plan**

- Describe financial controls in place to ensure that program funds are used appropriately
- Specify all sources of funds to be used to operate the proposed program
- Verify program is cost-effective and can be effectively implemented

# **Application Section E – Maximum 10 Points**

### **Area Linkages and Relations**

- Provide evidence of established linkages with the federal government, state, local, or tribal governmental agencies, or private entities to provide additional services to participants
- Demonstrate successful past working relationships with public and/or private institutions providing services to Veterans and/or individuals at risk of suicide
- Establish that applicant has knowledge of and presence in the area or community in which the proposed program will be operated
- Describe how linkages to the local area or community are expected to enhance the effectiveness of the proposed program

# **Application Section F**

### **Applicant Certifications and Assurances**

- Compliance
- Accuracy of application information
- Non-delinquency
- Debarment
- Reports and record retention
- Fiscal control
- Civil rights
- Lobbying

# **Application Section G**

### **Reference for Citation**

• All literature that has been cited needs to be listed as a reference here and correspond via a numbering system for identifying the location within the document of the in-text citation.

#### Application Section G: Exhibits I-V (Attachments)

Applicant must be registered on SAM.gov prior to creating application to obtain a Unique Entity ID (UEI) number. Instructions on how to register your organization and obtain a UEI number are available on SAM.gov.

- I. Applicant Organizational Chart
- II. Key Personnel Resumes and Hiring Criteria for Proposed Staff
- III. Program Budget (complete attached Microsoft Excel Applicant Budget Template)
- IV. Documentation that demonstrates your organization is one of the required eligible entities. (I.E. Bylaws, Articles of Incorporation, 501c3, etc.)
- V. Optional: Letters of coordination from area suicide prevention initiatives where services are proposed, relevant Memoranda of Understanding (MOUs) demonstrating area linkages and/or Partnership Agreements.

# Fiscal/Budgeting

#### **Allocation of Funds**

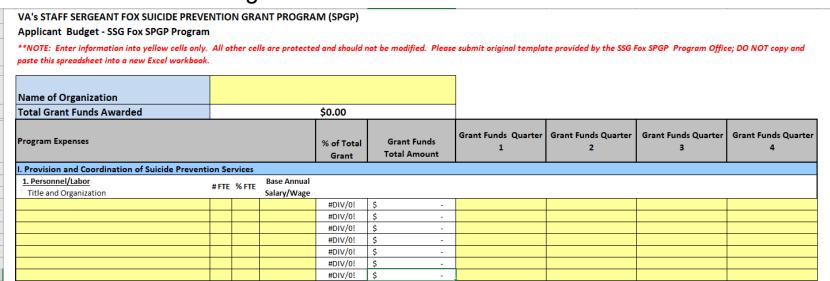
- VA expects to announce grant awards in the fourth quarter of fiscal year 2022.
- Applicants can request a maximum of \$750,000.
- VA reserves the right in any year to make adjustments (e.g., to funding levels) as needed within the intent of the NOFO based on a variety of factors, including the availability of funding.
- Access to funding will be facilitated through an account within the Department of Health and Human Services' Payment Management System.
- All awarded organizations will need to have active SAM.gov accounts and complete the vendorization process (if not already completed) for VA's financial system.
  - Instructions on setting up an active SAM.gov registration can be found on the SAM.gov website.
  - Further instruction will be provided on the "vendorization" process at a later date.

# SSG Fox SPGP Budget Workbook

- Multiple tabs
  - Budget Instructions
  - Budget
  - Budget Narrative

Other Non-Personnel Provision and Coordination of Suicide Prevention Services Extended and Coordination of Suicide Prevention Services (Services And Coordination Services And Coordination Servic

- Budget
  - Conditional formatting and linked cells



#### SSG Fox SPGP Budget Workbook (cont'd)

#### **Budget Narrative**

- Must provide budget narrative within the VA-provided Excel template in the Budget Narrative tab
- Enter detailed narrative explanations for all line items listed on the budget tab
- Justifications are required for all line items, including administrative direct and indirect costs

VA's STAFF SERGEANT FOX SUICIDE PREV SSG Fox SPGP Annual budget	ENTION GRAI	NT PRO	OGRAM (SPGP)			
Proposed Funding Information:						_
Name of Organization:						
Total Grant Funds Requested:				\$0.00		
ogram Expenses			% of Total Grant Funds Grant Total Amount		Detailed Narrative Justification	
. Provision and Coordination of Suicide Preven	tion Services					
1. Personnel/Labor Title and Organization	#FTE	% FTE	Base Annual Salary/Wage			
0	0	0%	\$ -	#DIV/0!	\$ -	
)	0	0%	\$ -	#DIV/0!	\$ -	
0	0	0%	\$ -	#DIV/0!	\$ -	

## SSG Fox SPGP Budget Workbook (cont'd)

#### **General guidance**

- Only enter data into the yellow cells
  - All other cells are locked
- Include your organization name at the top of the budget worksheet
  - Leave grant ID cell empty
- Do not attempt to unlock or modify this workbook
- Download this file from UDPaaS system or from: <a href="https://www.mentalhealth.va.gov/ssgfox-grants/index.asp">https://www.mentalhealth.va.gov/ssgfox-grants/index.asp</a>

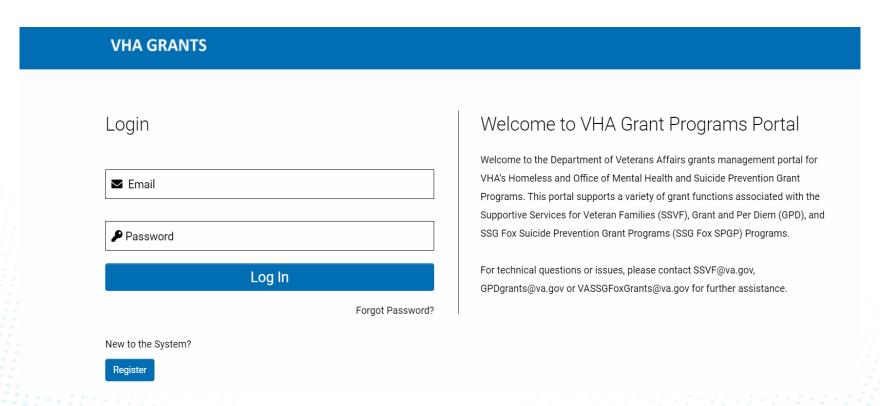
# Application Submission

#### **Application Submission Requirements**

- IMPORTANT: Prior to submitting an application, applicants must register on sam.gov to obtain a Unique Entity Identifier (UEI)
  - Instructions on how to register your organization and obtain UEI number available on sam.gov
- Application is submitted on time and is complete
- All application materials are submitted as a complete package in UDPaaS
- Applicant is one of the following:
  - An incorporated private institution or foundation
  - A corporation wholly owned or controlled by a non-profit organization with a governing board
  - An Indian tribe that is defined as a federally or state-recognized tribe
  - A community-based organization that can effectively network with local civic organizations, regional health systems, and other settings where eligible individuals and their families are likely to have contact; or (5) a state or local government
- Proposed activities are eligible for funding
- Proposed participants are eligible to receive suicide prevention services
- Applicant does not have an outstanding obligation to the federal government that is in arrears and does not have an overdue or unsatisfactory response to an audit
- Applicant is not in default by failing to meet the requirements for any previous federal assistance

## **Application Materials**

- Apply using the online application tool available at: <u>UDPaaS VHA</u>
- Applicants will need to create a login.
- Draft versions of the application can be saved. NOTE: Return to drafts via the account login in order to avoid starting a new blank form.



# **UDPaaS** Registration

#### **VHA GRANTS**

#### **Registration Options**

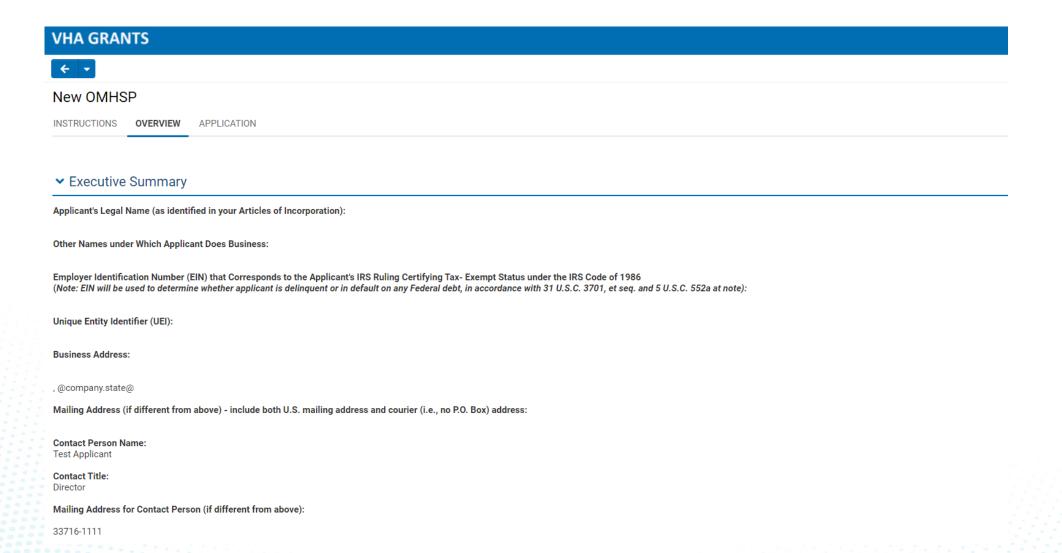
To register your Organization, please select:

- 1. Charitable Organization registration if you are a nonprofit registered with the IRS.
- 2. Eligible Entities that are Not Charitable Organizations registration if you are:
  - City/township government
- County government
- State government
- Tribal organization
- Public/Indian housing authority
- Consumer Cooperative
- · Any other eligible entity

#### **Charitable Organizations**

Eligible Entities that are Not Charitable Organizations

# **UDPaaS: Executive Summary**

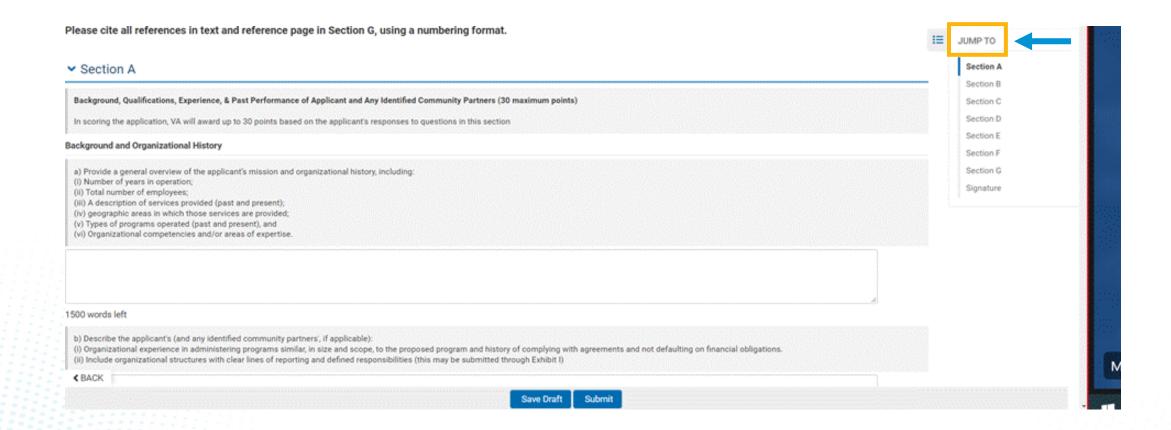


# **UDPaaS: Overview**



OVERVIEW	APPLICATI	ION													
1135 words le	ft														
Suicide Preve	ntion Funds	Requested													
Amount of s	ulcide preven	tion services	grant fu	nds requested under th	his NOFO. (maxim	num \$750,000 pe	er year).								
Projected Elig	ible Individu	ials to be se	rved												
Number of U	nique Eligible	Individuals	Estimate	d to be Served, per yea	nr.										
Average Cost	Per Eligible	Individual													
Average tota	l suicide prev	vention servic	es grant	amount request per El	ligible Individual.	This amount sho	ould equal tota	grant amount	divided b	y number of	Eligible Ind	ividuals se	rved.		
Geographical	Area Served	ı													
Select all tha	it apply.														
☐ AK ☐ F	L 🗆 LA	□ NC □	OR [	⊃ VI											
□ AL □ G	A 🗆 MA	□ ND □	PA [	□ VT											
☐ AR ☐ G	U 🗆 MD	□ NE □	PR [	□ WA											
☐ AS ☐ H	II 🗆 ME	□ NH □	RI [	□ WI											
								Save Draf	ft S	ubmit					

# **UDPaaS: Application**



#### **UDPaaS-Application Section B Proposed Services Table**

#### **Proposed Program And Services**

Identify in the table below which of the following suicide prevention services the applicant will either provide directly (using SSG Fox SPGP funds) and/or assist participants in obtaining through referrals to other organizations. Click on the plus sign to add each suicide prevention service individually. Please ensure to include ALL of the proposed services the applicant plans to provide and a description of each. Baseline Mental Health screening is required to be provided by all applicants.

See 38 CFR 78.45 to 78.90 for definitions of Type of Benefit and Services.



#### **UDPaaS: Draft Version**

#### **New OMHSP** INSTRUCTIONS OVERVIEW APPLICATION Describe the applicant plan for obtaining air randing required to operate the program for the time period of the suicide prevention services grain, and whether the applicants program is cost effective and can be effectively implemented on budget 1500 words left ✓ Section E **Area Linkages and Relations** In scoring the application, VA will award up to 10 points based on the applicant's responses to questions contained in this section. Area Linkages \* Evidence of Established Linkages a) Provide evidence of established linkages (e.g., MOUs or letters of support) with the Federal government (including VA), State, local or tribal governmental agencies, or private entities for the purposes of providing additional services to participal may also include a plan to establish such linkages for the purposes of providing additional services to participants. 1500 words left \* b) Provide evidence of the applicant's, and any identified community partners', current and/or planned coordination and outreach with State and/or County (parish) Veterans' affairs departments/agencies. **◆** BACK

## **UDPaaS: Application Preview**

#### **VHA GRANTS**



Actions **▼** 

NY-SSG-23-22

Type: Initial SSG Fox SPGP

Organization Legal Name: SSG Fox SPGP Testing, Inc 🔀

Status: Draft

Primary Contact: Test Applicant

Program Name: Office of Mental Health and Suicide Preventions

Application Submission

04/15/2022 00:00

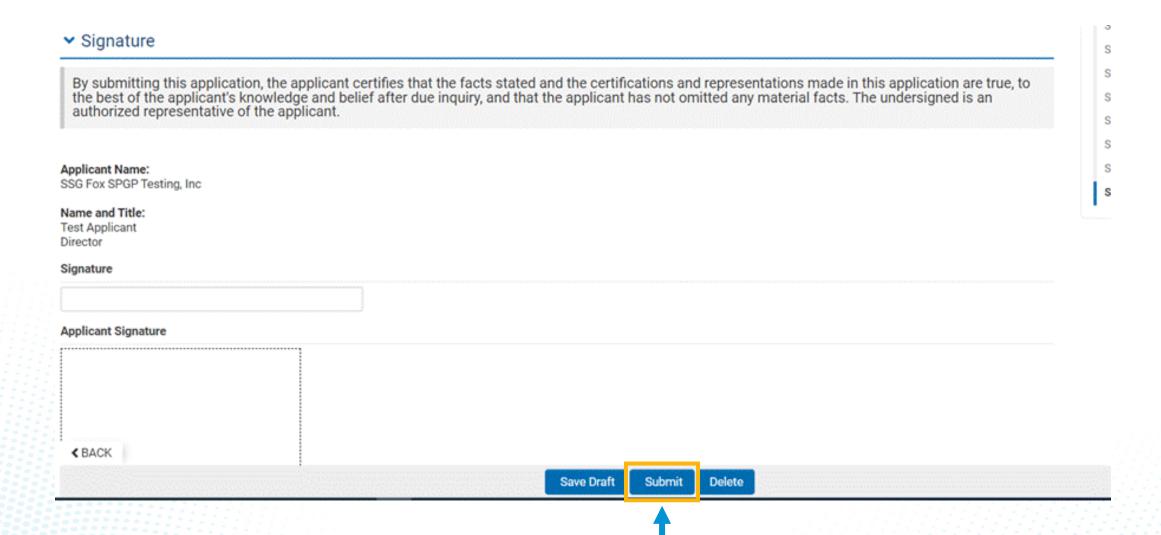
Application Summary:

Deadline:





## **UDPaaS: Submitted Application**



#### **Application Submission Tips**

- Register organization on sam.gov and obtain UEI
- Answer application questions and use data
- Save frequently- there is a system 15 minute session inactivity time out
- Answer questions fully noting 1500 word limit per text box
  - Responses over 1500 words will be flagged by UDPaaS system and submission will be prohibited
- Describe program's impact on suicide prevention
- Remember to add ALL applicant proposed suicide prevention services (Section B Table)

## **Application Submission Tips (cont'd)**

- Please allow ample time for application submissions and any technology challenges.
- Prepare any required attachments prior to submission:
  - Budget template
  - Organizational chart
  - Key personnel resumes and hiring criteria for proposed staff
  - Eligible entity type verification documentation
  - Letters of coordination, MOU's (optional)
- The estimated burden to complete the application is 35 hours. Applicants are strongly encouraged to begin
  the process well in advance of June 10, 2022.
- VA cannot make exceptions for late submissions.
- The online form automatically closes at 11:59 p.m. on June 10, 2022, Eastern Time.

# Application Review Criteria

#### **Application Review**

- Materials submitted after the deadline will not be reviewed.
- Applicant must meet the following requirements to be considered for SSG Fox SPGP funding:
  - Receive at least 60 cumulative points and receive at least one point under each of the categories
  - Demonstrate the ability to provide or coordinate suicide prevention services
- VA funding is highly competitive. A qualifying score does not guarantee funding.
- To extent possible VA will ensure grants are distributed to provide services in as many geographic areas as possible
- VA may prioritize the distribution of suicide prevention services grants to:
  - Rural communities
  - Tribal lands
  - Territories of the United States
  - Medically underserved areas
  - Areas with a high number or percentage of minority Veterans or women Veterans
  - Areas with a high number or percentage of calls to the Veterans Crisis Line

#### **Veteran Data Resources**

- Veteran Suicide Data and Reporting: <a href="https://www.mentalhealth.va.gov/mentalhealth/suicide">https://www.mentalhealth.va.gov/mentalhealth/suicide</a> prevention/data.asp
- Veterans Strategic Analysis & Research Tool (V-START):
   V-START Institute for Veterans and Military Families (syracuse.edu)

For more information about the SSG Fox SPGP, visit <a href="www.mentalhealth.va.gov/SSGFox-Grants">www.mentalhealth.va.gov/SSGFox-Grants</a> or contact <a href="mailto:VASSGFoxGrants@va.gov">VASSGFoxGrants@va.gov</a>.